QUEEN OF ANGELS HOSPITAL

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242881

REFERRED BY:

Dr. G. Nécola

NAME:

ELLACURIA, ALOYSIUS C.M.F. 843

ROOM-

12/15/76 DATE .

3-61-08 X-RAY #:

RADIOLOGICAL CONSULTATION AND REPORT:

GALLBLADDER

Examination by oral contrast media method including compression spot films reveals the gallbladder to concentrate well. It is of average size and shape. There is no evidence of billary calculi.

NORMALLY CONCENTRATING GALLBLADDER SHOWING NO CALCULI. Conclusion:

UPPER G.I. SERIES

Preliminary film of the abdomen shows isolated barium-filled diverticula to the colon.

Examination revealed the esophagus to be normal in course and in calibre. No hiatal hernia was seen.

The stomach was of the high transverse type. The mucosa appeared to be intact.

The duodenal bulb filled and emptied readily. No ulcer crater was seen. The duodenal loop was unremarkable.

A delayed film showed progression of the barium meal to the proximal small intestine.

Conclusion:

NO ORGANIC ABNORMALITY IDENTIFIED IN THE ESOPHAGUS. STOMACH OR DUODENUM.

SRP/dk 12/15/76

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S. Ross Pirruccello, MD

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ELLACOTIC. ALCYCHUS C.H elecate .o .a 80-10-E Externation by oral contract media a fred dacing couprossis. to all it . lies obertaepace of rebbelditse ent elsever amilities of avarage size and shape. There is no evidence of billiony calcult. Conclusion: .. NORMALLY CONCENTRATING CARLELAGORE SHOWING NO CALCULT. UPREK G. J. SERVES COS CONTRACTOR mreliminary film of the abdomen shows isolated barism-filled diverticula ting colon. Cxamination revealed the deepsineds to be normal t course and in calibra, ke histal horala was seen. The stomach was of the high transverse type. The nucess appeared to .tostai ad The duodenst bulb filled and entitled the duodenst was vicer crater was seen. The decidenal loop was warmarkeele. A delayed film showed progression of the barium meet to the proximal . Aniteotal Hame NO EXCENTE PRODUCTIVE TO ENTIRE THE ENGLISHMENTS. . : nothuloubs . MINICOUD NO HOAMOTE S. Ross Firreccello, M. .1.0.0:.0.0

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Dr. G. Nicola

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ELLACURIA, ALOYSIUS

NAME: DATE:

X-RAY #:

3-61-08

RADIOLOGICAL CONSULTATION AND REPORT:

Examination consisting of one view at the bedside reveals both lungs to be clear, well aerated and without evidence of changes to indicate an active pulmonary process.

The heart shows slight enlargement. The central lung vessels are of average prominence without evidence of congestion. There is no pleural effusion on either side.

Conclusion: CARDIOMEGALY WITHOUT EVIDENCE OF CONGESTIVE CHANGES.

SRP/dk 12/27/76

CHEST

S. Ross Pirruccello, MD

S. Rosa Farrage, Tall.

SULACURIA, ALBUDALUS of the bloom . The contract of 80-18-8 char, west asserted and afficient synather of changes to hall sha the meant spots stight entertonent. The central dum vesets are of average ereminence without evidence of congestion. more is applicated afficient or either side. Concionio CALCIONICALY MATHORI EVIDENCE OF CONCESTIVE DRANCES. S. Pass Pirevocallo, HO

DEPARTMENT OF RADIOLOGY QUEEN OF ANGELS HOSPITAL 2301 BELLEVUE AVENUE MILO M. WEBBER, M.D. EDUC. CONSULTANT LOS ANGELES 90026 STEFAN P. WILK, M.D. JOHN E. AIKEN, M.D. S. R. PIRRUCCELLO, M.D. GEORGE C. HSZIEH, M.D. 242881 ELLACURIA, ALOYSIUS C.M.F. REFERRED BY: NAME: ROOM: 843 12/14/76 Dr. G. Nicola DATE: 3-61-08 X.RAY #: RADIOLOGICAL CONSULTATION AND REPORT: EXCRETORY UROGRAM(1.V.P.) Preliminary film shows deformity of the left femoral head, with an associated narrowing of the joint related to degenerative changes. Following I.V. injection of 30 cc. of Renografin 76, the patient developed a mild reaction with sneezing, and mild urticaria. No further injection was made and the examination was completed. There was a prompt bilateral excretion and equal concentration with satisfactory visualization of the collecting structures. There is a slight cortical defect in the upper pole of the right kidney, which may be related to either an old infarct or pyelonephritis. Tomographic studies were obtained which showed the kidneys to be of average size. The ureters are normal in demonstrated course and calibre. The bladder shows a large ventral defect consistent with prostate enlargement. There was moderate retention after voiding. NORMALLY FUNCTIONING KIDNEYS BILATERALLY. LOCALIZED CORTICAL DEFECT IN THE UPPER POLE OF THE RIGHT KIDNEY, POSSIBLY RELATED TO CHRONIC INFLAMMATORY Conclusion: PROSTATE ENLARGEMENT WITH BLADDE RETENTION. SRP/dk I.V.P. 12/14/76

AND THE PROPERTY OF THE PARTY OF FILL COURTS PARTY STATES O. U. F. aldain . D. T. Prolinicary film shows deferrify of the left femoral head, with an accommon appropriate to decement ive channes. Following 1. V. injection of 50 dc. of enografia 71, the patient devaloped a mild reaction with sheezing, and mild articaria. to further injection was and one the examination was completed. There was a prompt pilatore exerction and equal concentration with softstactory visualization of the collection atrustures. cortic defect in a upper note of the right to re related to either an old interest or pyolonephtheile sel ohedt ver doldw trentia edition. To set of example studies were sufficiently to be at the kidneys to be of average size. The urefers are mermal in dome trated or eso and colfore. The Biadder shows a large we call defo condictort with presints e enlorgonget. There was moderate ret rion at all rough and the second Conclusion ** Polatica 12/44/5

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ELLACURIA, ALOYSIUS C.M.F.

DATE:

32/16/76

X-RAY #:

3-61-08

RADIOLOGICAL CONSULTATION AND REPORT:

LUMBAR SPINE LUMBOSACRAL SPINE

Examination consisting of multiple projections shows good general vertebral alignment. A portion of the lumbar spine is **secured** by some barium filled diverticula of the descending and sigmoid colon.

The lumbosacral joint space appears relatively narrow. There are moderately advanced hypertrophic degenerative changes as evidenced by marginal hypertrophic lipping throughout the lumbar and the lumbosacral regions.

Subchondral scienotic changes involve the articular facets of L3 - L4 through L5 - S1.

Degenerative changes also involve the sacrolliac regions.

Conclusion:

NO EVIDENCE OF FRACTURE OR DISLOCATION.

MODERATELY ADVANCED HYPERTROPHIC DEGENERATIVE CHANGES

PELVIS & LEFT HIP

Examination consists of AP and both oblique projections of the pelvis including AP and lateral projections of the left hip, and they show the following:

There are degenerative changes of the left hip as evidenced by narrowing of the joint space and evernation of the adjacent articular surfaces. Subchondral sclerotic as well as cystic changes involve the articular surfaces and head of the femur. The right hip appears to be intact. A portion of the pelvis is obscured by barium in the colon.

Conclusion:

NO EVIDENCE OF FRACTURE OR DISLOCATION.
DEGENERATIVE CHANGES OF THE LEFT HIP.

SRP/dk 12/16/76

Lumbar/Lumbosacral spine:Pelvis & left hip

S. Ross Pirruccello, MD

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WELLACOPIA, ALGYALDIA O. W sloom 12/10/76 80-13-8 Even ination consisting of multiple projections shows good central vertebral alignment. A northog of the lumbar apice is becured by some borling tilled diverticals of the descending and signelt colon. The lumbosceret icint made appears relatively merrow. There are noderately advanced hyportrophic deconcrative changes on evidenced by marginal hypertrophic lipping throughout the lumber and their lumbosacral recions. Subcoondral schapotic change involve the articular facets of L5 through L5 - St. Degenerative changes also involve the sacroidist regions. HO EVIDENCE OF ERACTURE OR DISCOCATION. :molaulono3 MODERATELY ADVINCED HYPERTROPHIC DECEMERATIVE CHANCES PREVIOUS STUFF HIR Exemination consists of AP and both oblique projections of the pelvis including We end lateral projections of the latt his, and they show the following: There are dangenorative changes of the test his as evidenced by mare rowing of the joint space and evernation of the asjagent articular surfaces. Subchandral scienatio as all as ayatic changes involve the articular surfaces and head of the femur. The right hip engests to be infact. A portion of the polyis is obscured by marium in the Complusion: NO EVIDENCE OF FRACTURE OR DISLOCATION. DEGREE CHANCES OF THE LEFT HERE Lumber/Lumbosocrat soint: Polyie & left hip as, Ross Pirruccatio, MD

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NAME:

ELLACURIA, ALOYSIUS

DATE:

12/14/76

ROOM:

843

X-RAY #:

RADIOLOGICAL CONSULTATION AND REPORT:

CHEST

Examination consisting of two projections shows the heart to be slightly enlarged.

No pulmonary congestive changes are seen.

There is a nodular density measuring approximately 6 mm. in diameter. In addition, there is a second poorly defined density in the right lower lung field, projected over the posterior aspect of the 8th rib. They are not identified in the lateral view. Oblique studies with markers on the nipple shadows and/or Tomographic studies would be helpful in the further evaluation.

Conclusion:

CARDIOMEGALY.

NODULAR DENSITYES PROJECTED OVER THE LOWER LUNG FIELDS ON BOTH SIDES, DESERVING FURTHER EVALUATION, AS COM-MENTED ON ABOVE.

SRP/dk 12/14/76

CHEST

S. Ross Pirruccello, MD

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S ILLACUSIA, ALOYSI S Talcoin . T . Suprofine officits lo nulmonary congestive enemous or, seen. There is a nodular density measuring approximately 6 mm. incliamers. in addition, there is a second courty defined density in the right lower lung field, projected over the posterior aspect of the Sthrip. They are not identified in the lateral view. College attains bluom exibute oidgerbook revenue evenue elegip off no enexism of im be helpful in the further evaluation. CARRETONEGALY. NODULAR DERSITES PROJECTED OVER THE LOVER LING FIELDS ON BOTH SIDES, DESERVING PURTICE EVALUATION, AS COM-MENTED ON AMOVE. Cost Pireuccello.

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Dr. G. Nicola

242881

ELLACURIA, ALOYSIUS C.M.F.

DATE: 12/1-/76

ROOM: 843

X-RAY #: 3-61-08

RADIOLOGICAL CONSULTATION AND REPORT:

BARIUM ENEMA

Preliminary film of the abdomen reveals degenerative changes of the lumbar spine, and advanced degenerative arthriticchanges of the left hip joint.

High Kv, thin barium suspension and multiple compression spot film technique were used. On fluoroscopy, the colon filled readily from the rectum to the cecum. No unusual irritability or spasticity of any segment of the colon were observed.

The review of the compression spot films and survey films reveals numerous scattered diverticula involving the sigmoid and distal colon. There is no radiological evidence of diverticulitis. The mudosa wherein visualized on postevacuation film is not remarkable.

Conclusion: DIVERTICULOSIS.

SK/dk 12/18/76

B.E.

Sin Kim, M.D.

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NAME:

ELLACURIA, ALOYSIUS C.M.F.

DATE:

12/14/76

ROOM: 843

X-RAY #: 3-61-08

RADIOLOGICAL CONSULTATION AND REPORT:

BARIUM ENEMA

Examination using thin barium suspension and High Kv technique, revealed no obstruction to retrograde flow of barium from rectum to cecum. There was reflux filling of the terminal ileum.

Review of fluoroscopic and conventional radiographs revealed numerous diverticula in the descending and the sigmoid colon, with a few scattered throughout the proximal colon. In addition, there is a persistent polypoid filling defect measuring 1.8 X 3 cm. located in the distal sigmoid colon. This appears to be of sessile type. The possibility of neoplasm is suggested.

In addition, there is a smaller filling defect located in the terminal leum, which measured 7 X 10 mm. This, however, is seen in only the one projection. A satisfactory evacuation was obtained.

In the evacuation film, there is suggestion of a second filling defect in the rectosigmoid region. The areas in question are within reach of endoscopic examination.

Conclusion:

PERSISTENT FILLING DEFECT IN THE DISTAL SIGMOID COLON WITH SUGGESTION OF A SECOND DEFECT IN THE RECTOSIGMOID REGION.

POLYPOID FILLING DEFECT IN THE SMALL INTESTINE SUG-GESTIVE OF A POLYP.

DIVERTICULOSIS OF THE DESCENDING AND THE SIGMOID COLON.

SRP/dk 12/14/76

B.E.

S. Ross Pirruccello, MD

S. Rosa Brusselle M. D.

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Conclusion: " PERSISTENT FILLING DEFECT IN THE DISTAL SIGNOLD COLON-WITH SUPPERIOR OF A SECOND BEFORT IN THE RECTORIES OF

POLYPOID FILLI G DEFICE IN THE SHALL INTESTINE SUG-GESTIVE OF A POLYE. DIVERTICULOSIS OF THE BESCHOALD AND THE STANDAD COLON.

es. Ross Pirruccells, id

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NAME:

ELLACURIA, ALOYSIUS CMF

DATE:

1/4/77 ROOM:

X-RAY #:

3-61-08

RADIOLOGICAL CONSULTATION AND REPORT

EXCRETORY UROGRAM (1.V.P.) WITH NEPHROTOMOGRAPHY

A preliminary KUB film shows no evidence of opaque biliary or renal calculi.

Contrast is present in colon diverticula and the left abdomen,

There is a prompt appearance of contrast within both upper collecting systems.

Nephrotomography shows both kidneys to be of average size, and to be normal in contour. No structural deformities of eiteber collecting system is demonstrated.

Both ureters are partially visualized and are usobstructed.

The bladder shadow is normal in contour with a prominent concave defect at the base of the bladder, representing an enlarged prostate.

The patient was unable to void.

Conclusion: FUNCTIONING KIDNEYS BILATERALLY.

NO PATHOLOGICAL PROCESS DEMONSTRATED TO INVOLVE EITHER KIDNEY.

NO EVIDENCE OF URETERAL OBSTRUCTION ON EITHER SIDE.

FINDINGS CONSISTENT WITH PROSTATIC ENLARGEMENT.

JEA/dk 1/4/77

I.V.P. WITH TOMOGRAMS

John E. Alken, MD

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The Bladder shades is commat in contour with a prominent conceve defect at the base of the bladder, representing an enlarged prostate.

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Conclusion: FUNDITUNIS WHOSEY STINTERINGY.

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